

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		<i>09/06/00</i>
O.I.P.E. CLASSIFIER		<i>48</i>	<i>9/1/00</i>
FORMALITY REVIEW	<i>A.S.</i>	<i>373</i>	<i>10-6-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 o ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	10/1/00
2	10/1/00
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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